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SOS
610 N. Silver St
Silver City, NM 88061

575-956-6131
575-956-6947

Haley, Shelly

ID: 1000010733986 DOB: 4/17/1975
Case Management Note (SOS)

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7/30/2023

2:45 PM

Presenting Problem:
Adjustment disorder along with delusional ideation's.
Ms. Haley continues to experience anxiety.
Ms. Haley continues to experience depression.

Recent History:
Client has a history of chronic homelessness, unemployment, substance abuse, anxiety, depression, delusions, and impairment in the functional domains of independent and community living, socializing and recreation.

Social Support Changes:
The following changes in her social support network or family have occurred: Client has been allowed to return to the shelter after absence for months.

Intervention:
Client was assisted with hygienic necessities so she may shower and maintain proper self care.

Assessment:
Ms. Haley appears friendly, minimally communicative, She exhibits speech that is normal in rate, volume, and articulation and is coherent and spontaneous. Language skills are intact. There are signs of anxiety. There are no signs of hyperactive or attentional difficulties. Ms. Haley's behavior in the session was cooperative and attentive with no gross behavioral abnormalities.

Plan:
Continue accommodating client to the best of shelter abilities and prompt client to participate in programming plans.

Diagnosis: Adjustment disorder with anxiety, F43.22 (ICD-10) (Active)
Delusional disorders, F22 (ICD-10) (Active)
Major depressive disorder, recurrent, mild, F33.0 (ICD-10) (Active)

History of Risk Factors:
*History of Alcohol or Substance Abuse
*History of Mental Illness:
Carries a Diagnosis of Manic Depressive Illness
History of Severe Anxiety or Panic Attacks

Current Risk Factors:
*Experiencing Severe Anxiety or Panic
*A Major Depression is Present

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